



City of Newark
NEW JERSEY
GOVERNMENT RECORDS REQUEST FORM
(GENERAL FORM)

OPRA# _____
Office of the City Clerk
Kenneth Louis, City Clerk
920 Broad St.
City Hall, Room, 306
Newark, New Jersey 07102
Telephone: (973) 424-4116
Facsimile: (973) 733-4893
Email: OPRA@ci.newark.nj.us

Important Notice

The reverse side of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Rachel MI P Last Name Leven
Company The Center for Public Integrity
Mailing Address 910 17th St. NW, 7th Floor
City Washington State DC Zip 20006 Email rleven@publicintegrity.org
Business Hours Telephone: Area Code 202 Number 481-1253 Extension ---
Fax Telephone: ---
Preferred Delivery: Pick Up --- US Mail X On Site Inspect ---
Circle One: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / HAVE NOT been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature [Signature] Date 9/4/2019

Payment Information

Maximum Authorization Cost \$ ---
Select Payment Method
Cash --- Check --- Money Order ---
Fees: Per Page – @ \$0.05
Business Paper
Per Page – @ \$0.07
Legal Paper
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Please send me any evacuation route documentation the city of Newark has that is current. Please send me any routes that have been updated for the Ironbound and southwards since October 2012. Please also send any routes for those locations from before ^{October} 2012. ~~7~~

I am a member of the media. Please apply any & all fee waivers that were applicable.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____
Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open _____
Denied - Closed _____

AGENCY USE ONLY

Tracking Information

Application # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total _____
Deposit _____
Balance _____
Balance Paid _____
Reserve Provided _____
CITY CLERK'S OFFICE
NEWARK, N.J.
ROOM 15A
2019 SEP 20 P 4:15